Presence of HIV in the Donated Blood Samples

1761. SHRI RAJUBHAI A.PARMAR:
SHRI SUSHILKUMAR SAMBHAJIRAO SHINDE:
SHRIMATl VEENA VERMA:

Will (he PRIME MINISTER be pleased to state:

(a) whether it is a fact that one of the main causes of spread of AIDS is the transfusion of HIV-infected blood;

(b) if so, how far the blood banks are still to be equipped to rule out the presence of HIV in blood samples donated and transfused. State-wise, indicating the number of blood banks, hospitals and nursing homes not so equipped; and

(c) the plan of action, if any, to appropriately equip these blood banks, hospitals and nursing homes for the purpose?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATl RENUKA CHOWDHURY): (a) As per reports available, the case of Human Immuno-deficiency Virus (HIV) transmission by the transfusion of blood and blood products accounts for only about 6—8 per cent of total cases in the country.

(b) and (c) Under the modernisation of blood banks in Blood Safety component of the National AIDS Control Programme, prior to 1992-93, 138 blood banks were given cash assistance for procurement of equipments, 378 blood banks weqrcquippcd so far and 299 blood banks are in the process of being equipped. 154 Zonal Blood Testing Centres have been established and 815 blood banks are provided cash and commodity assistance as a part of modernisation. All the blood banks have been supplied with HIV test kits for HIV testing.

देश में एडस ग्रस्त रोगी

1762. **प्रो0 विजय कुमार मल्होत्रा** : क्या **प्रधान मंत्री** यह बताने की कृपा करेंगे कि **:**

(क) देश में एडस ग्रस्त रोगियों की संख्या कितनी है;

(ख) सन 2000 ई0 तक भारत में एडस रोगियों की अनुमानित संख्या क्या होगी; और

(ग) एडस के प्रकोप को रोकने के लिये सरकार क्या कदम उठा रही है?

स्वास्थ्य और परिवार कल्याण मंत्रालय में राज्य मंत्री (श्रीमती रेणुका चौधरी) : (क) 30 जून, 1997 की स्थिति के अनुसार राष्ट्रीय एडस नियंत्रण संगठन को 4725 एडस रोगियों की सूचना दी गई है ।

(ख) देश में लगभग 65200 एच0आई0वी0 पाजिटिव रोगियों की सूचना दी गई है । उनमें से कुछ सन 2000 ईसवी तक एडस रोगी हो जाएंगे ।

(ग) भारत में एच0आई0वी0/एडस के फैलाव की रोकथाम के लिये पूरे देश में केन्द्र प्रायोजित स्कीम के रूप में इस समय एक व्यापक कार्यक्रम कार्यान्वित किया जा रहा है । कार्यक्रम की कार्यनीतियों में निम्नलिखित शामिल है:-

(i) केन्द्र और राज्य स्तर पर कार्यक्रम प्रबंध क्षमताओं को सुदृढ़ करना ।

(ii) अधिक जोखिमपूर्ण आचरण करने वाले लोगों और आम जनता में एच0आई0वी0/एडस के बारे में जागरूकता पैदा करना ।

(iii) यौन संचारित रोग नियंत्रण ।

(iv) रक्त निरापदता और रक्त का विवेकपूर्ण इस्तेमाल सुनिश्चित करना ।

(v) निगरानी और निदान को सुदृढ़ करना ।

(vi) एच0आई0वी0/एडस रोगियों का चिकित्सीय उपचार प्रबंध ।

CGHS Dispansarics in Pitampura

1763. SHRIMATl MALTI SHARMA: Will the PRIME MINISTER be pleased to state:

(A) whether Homoeopathic and Ayurvedic dispensaries have been opened in Pitampura, Delhi for the CGHS beneficiaries living there;

(b) if so, the locations thereof; and

(c) if not, the reasons therefor and by when these dispensaries arc proposed to be opened?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) to (c) The beneficiaries residing in Pitampura area are covered for obtaining Homocopathit/Ayurvedic treatment by the CGHS dispensary functioning at Dev Nagar, New Delhi. The CGHS network in different systems of medicine is gradually being expanded, subject to needs of beneficiaries and availability of resources.

Schemes for Health Improvement of Tribal Women in M.P., Rajaslhan and Assam

1764. SHRI SHIV CHARAN SINGH:
SHRI GOVINDRAM MIRI:

Will the PRIME MINISTER be pleased to state:

(a) What are the details of schemes/ projects for improvement of health of the tribal women in Madhya Pradesh, Rajasthan and Assam launched by the Ministry of Hcahh and Family Welfare during the last five years; and

(b) what has been the achievement level of each of these, as on date?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) and (b) In ordr to provide preventive, promotive, curative and rehabilitative helath care services for the improvement of heahh of the people including tribal women, since inception 4959 Sub-Centres, 633 Primary Helath Centres and 96 Community Health Centres have been established in tribal areas of Madhya Pradesh, 934 Sub-Centres, 171 Primary Health Centres & 26 Community Health Centres in tribal areas of Rajas-than; and 445 Sub-Centres, 74 Primary Health Centres and 34 Community Health Centres in tribal areas of Assam. Besides this, a number of Allopathic dispensaries/hospital mobile clinics. Homoeopathic and Ayurvedic dispensaries/hospitals have also been functioning to cater to health care needs of the people in tribal areas in these states, including women. Various National programmes to control/eradicate communic-able/non-communicablc diseases like National Malaria Eradication Programme, National Leprosy Eradication Programme, National TB Control Programme, National Programme for Control of Blindness, National AIDS Control Programme with Blood Safety & STD Control Programme, National Iodine Deficiency Disorders Control Programme, etc. have been in operation for improvement of health of all people including tribal women in these states.

In addition, under the Child Survival & safe Motherhood Programme interventions like immunisation. Control of diar-rhoeal disease and acute respiratory tract infection, essential maternal & new-born care and prophylaxis against Vitamin-A & Iron deficiency have been implemented to reduce morbidity & moratality of women and children in all districts in these States.

The State-wise physical achievements for the major disease Control Programmes are given below which cover all patients including women.